MCCARTHY NIIRSING HOME

Mentally Ill

Provide Day Programming for

Provide Day Programming for

Developmentally Disabled

MCCARTHY NURSING HOME 124 SOUTH MONROE STREET							
STOUGHTON 53589 Phone:	(608	) 873-7462 Owner	rship:		Ir	ndividual	
Operated from 1/1 To 12/31 Days			-			DDs	
Operate in Conjunction with Hospita		1					
Number of Beds Set Up and Staffed	(12/	31/02): 18 Title	e 18 (Med	dicare) Certifie	ed? No		
Total Licensed Bed Capacity (12/31/	(02):	18 Title	- 19 (Med	dicaid) Certifie	ed? Ye	es	
Number of Residents on 12/31/02:		15 Avera	age Daily	Census:	14	4	
*********	***	********	*****	*****	*****	*******	*****
Services Provided to Non-Residents							
Home Health Care Supp. Home Care-Personal Care							
Supp. Home Care-Household Services							
Day Services		Mental Illness (Org./Psy)					
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	6.7		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivale	ent
Congregate Meals		Cancer	0.0			Nursing Staff per 100	Residents
Home Delivered Meals		Fractures				(12/31/02)	
Other Meals		Cardiovascular				•	
Transportation		Cerebrovascular					8.0
Referral Service		Diabetes		Sex			2.2
Other Services		Respiratory					

66.7 | Aides, & Orderlies

33.3 | -----

100.0

34.7

Method of Reimbursement

Other Medical Conditions 0.0 | Male

No I

Yesl

	Medicare (Title 18)			Medicaid (Title 19)			Other		P	Private Pay		Family Care			Managed Care					
Level of Care	No.	o <sub>o</sub>	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	ᅇ	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				15	100.0	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	15	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		15	100.0		0	0.0		0	0.0		0	0.0		0	0.0		15	100.0

---- | Female

100.0 |

MCCARTHY NURSING HOME

********	*****	******	*****	*****	*****	******	******
Admissions, Discharges, and	1	Percent Distribution	of Residents'	Condit	ions, Services	, and Activities as of 12	/31/02
Deaths During Reporting Period							
	1				% Needing		Total
Percent Admissions from:	1	Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		73.3	26.7	15
Other Nursing Homes	0.0	Dressing	26.7		46.7	26.7	15
Acute Care Hospitals	0.0	Transferring	46.7		33.3	20.0	15
Psych. HospMR/DD Facilities	50.0	Toilet Use	46.7		33.3	20.0	15
Rehabilitation Hospitals	0.0	2	46.7		53.3	0.0	15
Other Locations	50.0	******	*****	*****	*****	*****	******
Total Number of Admissions	4	Continence		용	Special Trea	tments	8
Percent Discharges To:	1	Indwelling Or Extern	al Catheter	6.7	Receiving	Respiratory Care	0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	66.7	Receiving	Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	33.3	Receiving	Suctioning	0.0
Other Nursing Homes	0.0				Receiving	Ostomy Care	0.0
Acute Care Hospitals	0.0	Mobility			Receiving	Tube Feeding	0.0
Psych. HospMR/DD Facilities	100.0	Physically Restraine	d	0.0	Receiving	Mechanically Altered Diet	s 13.3
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Reside	nt Characteristics	
Deaths	0.0	With Pressure Sores		0.0	Have Advar	ce Directives	100.0
Total Number of Discharges	1	With Rashes		0.0	Medications		
(Including Deaths)	1				Receiving	Psychoactive Drugs	46.7

	This Facility		DD ilities		All ilties	
	% 	e ac	Ratio	% 	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	77.8	83.9	0.93	85.1	0.91	
Current Residents from In-County	26.7	38.2	0.70	76.6	0.35	
Admissions from In-County, Still Residing	0.0	18.5	0.00	20.3	0.00	
Admissions/Average Daily Census	28.6	20.3	1.40	133.4	0.21	
Discharges/Average Daily Census	7.1	23.6	0.30	135.3	0.05	
Discharges To Private Residence/Average Daily Census	0.0	9.8	0.00	56.6	0.00	
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00	
Residents Aged 65 and Older	20.0	15.3	1.31	87.7	0.23	
Title 19 (Medicaid) Funded Residents	100.0	99.2	1.01	67.5	1.48	
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00	
Developmentally Disabled Residents	100.0	99.5	1.00	7.1	14.08	
Mentally Ill Residents	0.0	0.4	0.00	33.3	0.00	
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00	
Impaired ADL (Mean) *	45.3	54.0	0.84	49.3	0.92	
Psychological Problems	46.7	48.2	0.97	54.0	0.86	
Nursing Care Required (Mean) *	1.7	11.3	0.15	7.2	0.23	